Image# 29990962409 02/04/2009 00:18

REPORT OF					OF PRESIDEN	1 / 38 T OR VICE-PRESIDENT
1. NAME OF COMMITT						
MIKE GRAVEL FOI	R PRESIDE	NT 2008				
ADDRESS (number and	d street)	Check if differen	nt than previo	usly reported		
1600 N OAK ST #14	412				2. IDENTIFICAT C0042320	
CITY, STATE, and ZIP	CODE				3. IS THIS REP	
ARLINGTON	VA		22209		☐ Primary	General
4. TYPE OF RI	EPORT	(Check here if the	is is a Termin	ation Report.)		
April 15 Overtent De				Monthly Report Due	On:	
April 15 Quarterly Re				February 20	June 2	_
July 15 Quarterly Report			March 20 April 20	☐ July 20	<u>=</u>	
October 15 Quarterly	/ Report			May 20	Septer	mber 20
January 31 Year End	d Report			Twelfth day report p	receding	
	•		_			(Type of Election)
				election on		in the State of
				Thirtieth day report f	following the Gener	ral Election on
				on		_
IS THIS REPORT AN A	MENDMENT	X YES	☐ NO			
5. COVERING PERIOD				FROM 09/01/2008		THROUGH 09/30/2008
SUMMARY		HAND AT BEGINNII ING PERIOD	NG OF THE			4581.27
		ECEIPTS THIS PERIO e 22, Column A, Page				0.00
	8. SUBTOTA (Lines 6 a					4581.27
		SBURSEMENTS TH e 30, Column A, Page				0.00
		N HAND AT CLOSE (Line 9 from 8)	OF REPORT	ING PERIOD		4581.27
		ND OBLIGATIONS O				250.00
		ND OBLIGATIONS (Il on Schedule C-P or				185927.73
	13. EXPEND	ITURES SUBJECT T	O LIMITATIO	N		556714.24
NET ELECTION CYCLE- TO-DATE		NTRIBUTIONS (Othe Line 28d, Column B fr		mn B, Page 2)		510430.36
EXPENDITURES		ERATING EXPENDIT Line 20a, Colummn B		ımn B, Page 2)		556714.24
I certify that I have exa		port and to the best	of my knowl	edge and belief it is t	rue, correct, and	complete.
Type or Print Name of Tr MIKE GRAVEL						Date 02/04/2009
Signature of Treasurer						,
NOTE: Submission of fal	lse, erroneous,	or incomplete informa	tion may subj	ect the person signing	this Report to the p	penalties of 2 U.S.C. §437g.
All previous versions of F	EC FORM 3P	are obsolete and shou	ıld no longer b	oe used.		
For further information	contact:	Federal Election Co		Toll Free 800-424		FEC FORM 3P (01/2001)

Local 202-694-1100

Washington, DC 20463

(PAGE 2, FEC FORM 3P) Name of committee (in full) MIKE GRAVEL FOR PRESIDENT 2008	Report Covering the Period			
MIRE GRAVEL FOR PRESIDENT 2008		From: 09/01/2008	To: 09/30/2008	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
16. FEDERAL FUNDS (Itemize on Schedule A-P)		0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees		0.00	509928.76	
(b) Political Party Committees		0.00	0.00	
(c) Other Political Committees		0.00	501.60	
(d) The Candidate		0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17	(c), 17(d))	0.00	510430.36	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00	
19. LOANS RECEIVED:				
(a) Loans Received From or Guaranteed by Candidate		0.00	73515.73	
(b) Other Loans		0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b))		0.00	73515.73	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :				
(a) Operating		0.00	0.00	
(b) Fundraising		0.00	0.00	
(c) Legal and Accounting		0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a),	20(b) and 20(c))	0.00	0.00	
21. OTHER RECEIPTS (Dividend, Interest, etc.)		0.00	6249.42	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)		0.00	590195.51	
II. DISBURSEMENTS				
23. OPERATING EXPENDITURES		0.00	556714.24	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00	
25. FUNDRAISING DISBURSEMENTS		0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		0.00	0.00	
27. LOAN REPAYMENTS MADE :				
(a) Repayment of Loans made or Guaranteed by Candidate		0.00	28900.00	
(b) Other Repayments		0.00	0.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		0.00	28900.00	
28. REFUNDS OF CONTRIBUTIONS TO :				
(a) Individuals/Persons Other Than Political Committees		0.00	0.00	
(b) Political Party Committees		0.00	0.00	
(c) Other Political Committees (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))		0.00	0.00	
29. OTHER DISBURSEMENTS		0.00	0.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		0.00	585614.24	
III. CONTRIBUTED ITEMS (Stock, Art C	Objects, etc.)			
		Î.		

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds) (PAGE 3, FEC FORM 3P)	3 / 38
1. NAME OF COMMITTEE (in full)	

MIKE GRAVEL FOR PRESIDENT 2008

ADDRESS (number and street)

1600 N OAK ST #1412

CITY, STATE, and ZIP CODE

ARLINGTON VA 2. IDENTIFICATION NUMBER

C00423202

ALLOCATION BY STATE

22209

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	10454.40
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	10454.40

Schedule C-P PAGE 4/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4621 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 23900.00 6100.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 24 0 7 2006 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 6100.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 5/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4629 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred D 1 24 0 7 2006 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 3000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 6/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4622 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred 0 9 2006 12/31/2006 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 7/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4623 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 100.00 100.00 **TERMS** Secured: Date Due Interest Rate Date Incurred 0 9 2006 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 100.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 8/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4726 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 25 2006 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 5000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 9/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the **LOANS** (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4743 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6000.00 0.00 6000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred о 3 0 2006 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 6000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 10/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.4744 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred D 1 1 8 2006 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 5000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 11/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5215 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 806.74 806.74 **TERMS** Date Due Interest Rate Secured: Date Incurred 02 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 806.74 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 12/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5217 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 181.87 181.87 **TERMS** Date Due Interest Rate Secured: Date Incurred 02 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 181.87 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P PAGE 13/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5220 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 95.70 95.70 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 02 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 95.70 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P PAGE 14/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5216 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1500.00 0.00 1500.00 **TERMS** Secured: Date Due Interest Rate Date Incurred D 1 25 02 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 1500.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only)

Schedule C-P PAGE 15/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5219 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 43.59 43.59 **TERMS** Date Due Interest Rate Secured: Date Incurred D 0 02 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 43.59 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P PAGE 16/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5221 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 1000.00 1000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred D 1 28 02 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 1000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P PAGE 17/38 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 Transaction ID: SC/12.5218 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: MIKE GRAVEL - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 1600 NO OAK ST APT 1412 City ARLINGTON State VA ZIP Code 22209 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 787.83 787.83 **TERMS** Date Due Interest Rate Secured: Date Incurred 03 8 0 2007 12/31/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 787.83 SUBTOTALS This Period This Page (optional) 44615.73 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

PAGE 18 / 38 Schedule D-P (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) X 11 **Excluding Loans** 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DONATIONS NOT TRANSFERRED **AUTHORIZENET CORP** Mailing Address 915 SOUTH 500 EAST SUITE 200 ZIP Code City AMERICAN FORK UT 84003 Outstanding Balance Beginning This Period Transaction ID: SD11.19805 250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 250.00 0.00 0.00 250.00 1) SUBTOTALS This Period This Page (optional)..... 250.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

250.00

PAGE 19/38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING FIELD REP CT CHRISTINE D'AMICO Mailing Address 2612 NORTH AVE D-9 ZIP Code City State **BRIDGEPORT** 06604 CT Outstanding Balance Beginning This Period Transaction ID: SD12.20453 1500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DICKSTEIN SHAPIRO LLP LEGAL FEES APRIL 2008 Mailing Address 1825 EYE STREET NW ZIP Code City State WASHINGTON DC 20006 Outstanding Balance Beginning This Period Transaction ID: SD12.20016 6914.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 6914.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DICKSTEIN SHAPIRO LLP **CONSULTING LEGAL MAY 2008** Mailing Address 1825 EYE STREET NW ZIP Code City State WASHINGTON DC 20006 Outstanding Balance Beginning This Period Transaction ID: SD12.20247 313.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 313.00 8727.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 20 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DICKSTEIN SHAPIRO LLP **LEGAL FEES AUGUST 2008** Mailing Address 1825 EYE STREET NW State ZIP Code City WASHINGTON 20006 DC Outstanding Balance Beginning This Period Transaction ID: SD12.20372 936.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 936.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DICKSTEIN SHAPIRO LLP LEGAL FEES SEPTEMBER 2008 Mailing Address 1825 EYE STREET NW ZIP Code State WASHINGTON DC 20006 Outstanding Balance Beginning This Period Transaction ID: SD12.20380 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 156.00 0.00 156.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING NATIONAL FIELD DIRECTOR Jacobson Elliott Mailing Address 1001 3rd Street, SW ZIP Code City State Washington 20024 DC Outstanding Balance Beginning This Period Transaction ID: SD12.20419 3000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3000.00 4092.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 21 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING NATIONAL FIELD DIRECTOR Jacobson Elliott Mailing Address 1001 3rd Street, SW City State ZIP Code Washington DC 20024 Outstanding Balance Beginning This Period Transaction ID: SD12.20418 3000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 3000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **CONSULTING - FUNDRAISING** Jacobson Elliott Mailing Address 1001 3rd Street, SW ZIP Code City State Washington 20024 DC Outstanding Balance Beginning This Period Transaction ID: SD12.20014 1000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): SUSAN GRIFFIN CAMPAIGN COORDINATION Mailing Address 5520 COVINGTON CT #106 ZIP Code City State **DEARBORN** 48126 MΙ Outstanding Balance Beginning This Period Transaction ID: SD12.20436 525.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 525.00 4525.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 22 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CAMPAIGN COORD-INATION MINDLIDEN Mailing Address 149 S. Barrington Ave. #326 State ZIP Code City LOS ANGELES 90049 CA Outstanding Balance Beginning This Period Transaction ID: SD12.19797 3000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 3000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FIELD REP NV **BECKY ISAIS** Mailing Address 5512 VISTA RIDGE WAY 7IP Code City State **KEARNS** 84118 UT Outstanding Balance Beginning This Period Transaction ID: SD12.20450 1050.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1050.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING FEES CAMPAIGN FIELD ORGANIZER **RODRIGUEZ JOSE** Mailing Address 1435 MONROE ST NW ZIP Code State City WASHINGTON 20010 DC Outstanding Balance Beginning This Period Transaction ID: SD12.20411 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 6550.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 23 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING FEES CAMPAIGN FIELD ORGANIZER **RODRIGUEZ JOSE** Mailing Address 1435 MONROE ST NW State ZIP Code City WASHINGTON DC 20010 Outstanding Balance Beginning This Period Transaction ID: SD12.20412 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CAMPAIGN FIELD ORGANIZER **RODRIGUEZ JOSE** Mailing Address 1435 MONROE ST NW 7IP Code City State WASHINGTON 20010 DC Outstanding Balance Beginning This Period Transaction ID: SD12.19794 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING FEES CAMPAIGN FIELD ORGANIZER **RODRIGUEZ JOSE** Mailing Address 1435 MONROE ST NW ZIP Code State City WASHINGTON 20010 DC Outstanding Balance Beginning This Period Transaction ID: SD12.20015 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 7500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 24 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ACCOUNTING CONSULTING KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State ZIP Code **BRISTOW** VA 20136 Outstanding Balance Beginning This Period Transaction ID: SD12.18205 2500.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 2500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ACCOUNTING CONSULTING KG INTERNATIONAL Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VA Outstanding Balance Beginning This Period Transaction ID: SD12.18206 2500.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 2500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): KG INTERNATIONAL CONSULTING ACCOUNTING Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VΑ Outstanding Balance Beginning This Period Transaction ID: SD12.19795 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 7500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 25 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING ACCOUNTING KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State ZIP Code **BRISTOW** VA 20136 Outstanding Balance Beginning This Period Transaction ID: SD12.20427 2500.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 2500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING ACCOUNTING KG INTERNATIONAL Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VA Outstanding Balance Beginning This Period Transaction ID: SD12.20428 2500.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 2500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ACCOUNTING SERVICES KG INTERNATIONAL Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VΑ Outstanding Balance Beginning This Period Transaction ID: SD12.20011 1000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1000.00 6000.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 26 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ACCOUNTING SERVICES KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State ZIP Code **BRISTOW** VA 20136 Outstanding Balance Beginning This Period Transaction ID: SD12.20245 1000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): KG INTERNATIONAL ACCOUNTING SERVICES Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VA Outstanding Balance Beginning This Period Transaction ID: SD12.20332 500.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): KG INTERNATIONAL ACCOUNTING FEES Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VΑ Outstanding Balance Beginning This Period Transaction ID: SD12.20371 500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 500.00 2000.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 27 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING FEES - ACCOUNT-ING KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State ZIP Code **BRISTOW** VA 20136 Outstanding Balance Beginning This Period Transaction ID: SD12.20375 850.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 850.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): KG INTERNATIONAL ACCOUNTING SERVICES Mailing Address 11311 TRENTON CT ZIP Code City State **BRISTOW** 20136 VA Outstanding Balance Beginning This Period Transaction ID: SD12.20377 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 500.00 0.00 500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **NEIL KIERNAN STEPHENSON** MI FIELD REPRESENTATIVE Mailing Address 52177 LEXINTON LN ZIP Code City State **CHESTERFIELD** 48051 MΙ Outstanding Balance Beginning This Period Transaction ID: SD12.20438 525.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 525.00 1875.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 28 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING OFFICE MANAGEMENT AFIFA KLOUJ Mailing Address 1001 3RD STREET SW #804 City State ZIP Code WASHINGTON DC 20024 Outstanding Balance Beginning This Period Transaction ID: SD12.20440 1050.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1050.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING DEPUTY CAMPAIGN MANGER JON KRAUS Mailing Address 4702 BELMONT DR 7IP Code City State **EMMAUS** 18049 PA Outstanding Balance Beginning This Period Transaction ID: SD12.20416 3000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 3000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING DEPUTY CAMPAIGN MANAGER JON KRAUS Mailing Address 4702 BELMONT DR ZIP Code City State **EMMAUS** PΑ 18049 Outstanding Balance Beginning This Period Transaction ID: SD12.20417 3000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3000.00 7050.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 29 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING DEPUTY CAMPAIGN MANAGER JON KRAUS Mailing Address 4702 BELMONT DR City State ZIP Code **EMMAUS** PA 18049 Outstanding Balance Beginning This Period Transaction ID: SD12.19791 2000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 2000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING NATIONAL PUBLICITY DIRECTOR JOE LAURIA Mailing Address 205 PINEHURST AVE #6J ZIP Code City State **NEW YORK** NY 10033 Outstanding Balance Beginning This Period Transaction ID: SD12.20430 1050.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1050.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CALIFORNIA COORDINATOR mosier lynne Mailing Address 76 patrick way ZIP Code City State half moon bay 94019 CA Outstanding Balance Beginning This Period Transaction ID: SD12.19793 5000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 5000.00 8050.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Schedule D-F	P		(Use separate	PAGE 30 / 38
			schedule(s)	FOR LINE NUMBER:
	OBLIGATIONS		for each numbered line	(check only one)
excluding Loa			Tiumbered iine	X 12
	MITTEE (In Full) EL FOR PRESIDENT 2008			
A. Full Nam	ne (Last, First, Middle Initial) of Deb	tor or Creditor		f Debt (Purpose):
SKYLER M	ICKINLEY		CONSU	JLTING INFORMATION IOLOGY
Mailing Addre	ress 1815 S. QUEEN WAY			
City	State	ZIP Code		
LAKEWOO	OD CO	80232		
Outstandir	ng Balance Beginning This Period		7	ransaction ID: SD12.20457
	5000.00			
Am	nount Incurred This Period	Payment This Period	Outsta	nding Balance at Close of This Period
' ' '	• • • • • • • • •			5000.00
	0.00	0.00		5000.00
B. Full Nam CASEY MC	ne (Last, First, Middle Initial) of Deb CLLVAINE	tor or Creditor		f Debt (Purpose): NATIVE DEBATE TECHNO-
Mailing Addre	ress 225 LYCEUM AVE			
City	State	ZIP Code		
PHILLADE		19128		
Outstandir	ng Balance Beginning This Period		7	ransaction ID: SD12.20455
Outstandir	ng Balance Beginning This Period 500.00		7	ransaction ID: SD12.20455
	500.00	Payment This Period		
	500.00 nount Incurred This Period	Payment This Period		nding Balance at Close of This Period
	500.00	Payment This Period 0.00		
Am C. Full Nam	500.00 nount Incurred This Period	0.00	Outstar Nature o	nding Balance at Close of This Period
C. Full Nam	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb	0.00	Outstar Nature o	nding Balance at Close of This Period 500.00 f Debt (Purpose):
C. Full Nam DAVID NEI Mailing Addre	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State	0.00 tor or Creditor	Outstar Nature o	nding Balance at Close of This Period 500.00 f Debt (Purpose):
C. Full Nam DAVID NEI	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD	0.00 tor or Creditor	Outstar Nature o	nding Balance at Close of This Period 500.00 f Debt (Purpose):
C. Full Nam DAVID NEI Mailing Addre	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State	0.00 tor or Creditor	Outstar Nature o CONSU	nding Balance at Close of This Period 500.00 f Debt (Purpose):
C. Full Nam DAVID NEI Mailing Addre	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL	0.00 tor or Creditor	Outstar Nature o CONSU	f Debt (Purpose): JLTING FIELD REP FL
C. Full Nam DAVID NEI Mailing Addre City LARGO	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL ng Balance Beginning This Period	0.00 tor or Creditor	Nature of CONSU	f Debt (Purpose): JLTING FIELD REP FL Transaction ID: SD12.20444
C. Full Nam DAVID NEI Mailing Addre City LARGO	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL ng Balance Beginning This Period 525.00	ZIP Code 33770	Nature of CONSU	f Debt (Purpose): JLTING FIELD REP FL
C. Full Nam DAVID NEI Mailing Addre City LARGO Outstandin	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL ng Balance Beginning This Period 525.00 nount Incurred This Period 0.00	ZIP Code 33770 Payment This Period 0.00	Nature of CONSU	f Debt (Purpose): JLTING FIELD REP FL Fransaction ID: SD12.20444 Inding Balance at Close of This Period 525.00
C. Full Nam DAVID NEI Mailing Addre City LARGO Outstandin	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL ng Balance Beginning This Period 525.00 nount Incurred This Period 0.00	ZIP Code 33770	Nature of CONSU	f Debt (Purpose): JLTING FIELD REP FL Transaction ID: SD12.20444
C. Full Nam DAVID NEI Mailing Address City LARGO Outstandin	nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL ng Balance Beginning This Period 525.00 nount Incurred This Period 0.00	ZIP Code 33770 Payment This Period 0.00	Nature of CONSU	f Debt (Purpose): JLTING FIELD REP FL Fransaction ID: SD12.20444 Inding Balance at Close of This Period 525.00
C. Full Nam DAVID NEI Mailing Address City LARGO Outstandin Am 1) SUBTOTALS 2) TOTALS The	500.00 nount Incurred This Period 0.00 ne (Last, First, Middle Initial) of Deb LSON VAN-DETTE ress 1013 RIDGE ROAD State FL ng Balance Beginning This Period 525.00 nount Incurred This Period 0.00 S This Period This Page (optional inis Period (last page this line number)	2IP Code 33770 Payment This Period 0.00	Nature of CONSU	f Debt (Purpose): JLTING FIELD REP FL Fransaction ID: SD12.20444 Inding Balance at Close of This Period 525.00

PAGE 31 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DAVID NELSON VAN-DETTE FIELD REP FL Mailing Address 1013 RIDGE ROAD City State ZIP Code **LARGO** FL 33770 Outstanding Balance Beginning This Period Transaction ID: SD12.20446 1050.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1050.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING WEBSITE DEVELO-PMENT NETWORK GUILD LLC Mailing Address 1068 TREVINO LN ZIP Code City State **HENDON** 20170 VA Outstanding Balance Beginning This Period Transaction ID: SD12.18207 10000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 10000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING WEBSITE MANAGE-MENT NETWORK GUILD LLC Mailing Address 1068 TREVINO LN ZIP Code City State **HENDON** 20170 VΑ Outstanding Balance Beginning This Period Transaction ID: SD12.20421 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 13550.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 32 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING WEBISTE MANAGE-MENT NETWORK GUILD LLC Mailing Address 1068 TREVINO LN City State ZIP Code **HENDON** VA 20170 Outstanding Balance Beginning This Period Transaction ID: SD12.20422 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING WEBSITE MANAGE-MENT NETWORK GUILD LLC Mailing Address 1068 TREVINO LN 7IP Code City State **HENDON** 20170 VA Outstanding Balance Beginning This Period Transaction ID: SD12.20423 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING WEBISTE MANAGE-MENT NETWORK GUILD LLC Mailing Address 1068 TREVINO LN ZIP Code City State **HENDON** 20170 VΑ Outstanding Balance Beginning This Period Transaction ID: SD12.20424 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 7500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 33 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CAMPAIGN MAGT CHRIS PETHRICK Mailing Address 16305 WOODVILLE ROAD State ZIP Code City **BRANDYWINE** MD 20613 Outstanding Balance Beginning This Period Transaction ID: SD12.20012 7498.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 7498.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **CONSULTING - CAMPAIGN MAGT** CHRIS PETHRICK Mailing Address 16305 WOODVILLE ROAD ZIP Code City State **BRANDYWINE** 20613 MD Outstanding Balance Beginning This Period Transaction ID: SD12.20246 7498.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 7498.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CHRIS PETHRICK CONSULTING CAMPAIGN MAGT Mailing Address 16305 WOODVILLE ROAD ZIP Code City State **BRANDYWINE** 20613 MD Outstanding Balance Beginning This Period Transaction ID: SD12.20425 7498.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 7498.00 22494.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 34 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CAMPAIGN MAGT CHRIS PETHRICK Mailing Address 16305 WOODVILLE ROAD City State ZIP Code **BRANDYWINE** MD 20613 Outstanding Balance Beginning This Period Transaction ID: SD12.20426 3749.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3749.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **PHOTOGRAPH GEORGE REBH** Mailing Address 4899 35TH RD NORTH ZIP Code City State **ARLINGTON** 22207 VA Outstanding Balance Beginning This Period Transaction ID: SD12.20448 2000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 2000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FIELD REP DC George Ripley Mailing Address 1425 Monroe S. NW ZIP Code City State Washington DC 20010 Outstanding Balance Beginning This Period Transaction ID: SD12.20447 525.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 525.00 6274.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 35 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CAMPAIGN COORD-INATION APRIL SHARPLEY Mailing Address 3801 TATTERSHALL LANE City State ZIP Code **AUSTIN** TX 78727 Outstanding Balance Beginning This Period Transaction ID: SD12.18204 2500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 2500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING CAMPAIGN COORD-INATION APRIL SHARPLEY Mailing Address 3801 TATTERSHALL LANE 7IP Code City State **AUSTIN** 78727 TX Outstanding Balance Beginning This Period Transaction ID: SD12.19798 1500.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 1500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): STACEY STANDLEY CONSULTING ENVIRONMENT Mailing Address 5114 TURNBURRY LN ZIP Code City State SPANISH TRAIL NV 89113 Outstanding Balance Beginning This Period Transaction ID: SD12.20452 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00 6500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 36 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FILM PRODUCTION **DAN SWARTZ** Mailing Address 95 HORATIO ST **APT 406** City State ZIP Code **NEW YORK** NY 10014 Outstanding Balance Beginning This Period Transaction ID: SD12.20432 1050.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1050.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FILM PRODUCTION RICH SWARTZ Mailing Address 95 HORATIO ST **APT 406** ZIP Code City State **NEW YORK** NY 10014 Outstanding Balance Beginning This Period Transaction ID: SD12.20434 1050.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1050.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING DATABASE MANAGEMENT **TELENOMICS GROUP** Mailing Address 1515 N WARSON RD, ST LOISE, MO 63 ZIP Code City State ST LOUISE 63132 MO Outstanding Balance Beginning This Period Transaction ID: SD12.18200 3000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3000.00 5100.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 37 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DATABASE MANAGEMENT CONSULTING **TELENOMICS GROUP** Mailing Address 1515 N WARSON RD, ST LOISE, MO 63 ZIP Code City ST LOUISE MO 63132 Outstanding Balance Beginning This Period Transaction ID: SD12.18201 3000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 3000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DATABASE MANAGEMENT CONSULTING **TELENOMICS GROUP** Mailing Address 1515 N WARSON RD, ST LOISE, MO 63 **7IP** Code City State 63132 ST LOUISE MO Outstanding Balance Beginning This Period Transaction ID: SD12.18202 3000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 3000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING DATABASE MANAGEMENT **TELENOMICS GROUP** Mailing Address 1515 N WARSON RD, ST LOISE, MO 63 ZIP Code City State ST LOUISE MO 63132 Outstanding Balance Beginning This Period Transaction ID: SD12.19796 3000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3000.00 9000.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 38 / 38 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 11 X 12 **Excluding Loans** NAME OF COMMITTEE (In Full) MIKE GRAVEL FOR PRESIDENT 2008 A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONSULTING DATABASE MANAGEMENT **TELENOMICS GROUP** Mailing Address 1515 N WARSON RD, ST LOISE, MO 63 City State ZIP Code ST LOUISE MO 63132 Outstanding Balance Beginning This Period Transaction ID: SD12.20420 1000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1000.00 1000.00 1) SUBTOTALS This Period This Page (optional)..... 141312.00 2) TOTALS This Period (last page this line number only)..... 44615.73 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

185927.73